

EXHIBIT A

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF NEW JERSEY

FRANK YOUNG, by Natural)
Father and)
Administrator Ad)
Prosequendum of the)
Estate of DASHAWN)
TAHREE YOUNG, and FRANK)
YOUNG, individually,)
Plaintiffs,)

vs.) Civil Action

) No. 2:05-cv-964

FRIGIDAIRE COMPANY,)
ELECTROLUX, WHITE)
CONSOLIDATED)
INDUSTRIES, JOHN DOE)
1-10)
(fictitious names), ABC)
CORP, 1-10 (fictitious)
names), PETER POE 1-10)
(fictitious names) AND)
XYZ CORP. 1-10)
(fictitious names),)

Defendants)

DEPOSITION OF CYRIL H. WECHT, M.D, J.D.

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AGENCY

<p>1 DEPOSITION OF CYRIL H. WECHT, M.D., J.D. 2 a witness herein, called by the Defendant, 3 Electrolux Home Products, Inc., for 4 examination, taken pursuant to the Federal 5 Rules of Civil Procedure, by and before 6 Monica R. Chandler, a Professional Court 7 Reporter and Notary Public in and for the 8 Commonwealth of Pennsylvania, at 9 the offices of Cyril H. Wecht, M.D., J.D., 10 1119 Penn Avenue, Suite 404, Pittsburgh, 11 Pennsylvania, on Wednesday, January 31, 2007, 12 at 11:20 a.m. 13 ----- 14 COUNSEL PRESENT: 15 For the Plaintiffs: Law Offices of Frank J. Zazzaro 16 by Bridget Saro, Esq. 17 For the Defendant, Electrolux Home Products, 18 Inc. (improperly plead as Frigidaire, Electrolux and 19 White Consolidated Industries): 20 Goldberg Segalla, LLP by David S. Osterman, Esq. 21 ----- 22 23 24 25</p>	<p>1 PROCEEDINGS 2 ----- 3 (Wecht Exhibit Nos. 1 through 4 5 were marked for identification.) 5 CYRIL H. WECHT, M.D., J.D. 6 a witness herein, having been first duly sworn, 7 was examined and testified as follows: 8 EXAMINATION 9 BY MR. OSTERMAN: 10 Q. Dr. Wecht, my name is 11 David Osterman. I'm a partner in the law firm 12 of Goldberg Segalla. I represent the 13 defendants in the case of Frank Young on behalf 14 of the Estate of Dashawn Young versus 15 Frigidaire and the Electrolux defendants. 16 I'm going to be asking you some 17 questions today. I know you're familiar with 18 the procedure for a deposition, so I'm just 19 going to jump right into my questions. 20 Have you seen previously what we 21 have marked as Exhibit No. 1 which is the depo 22 notice which asked you to bring certain 23 materials with you to the deposition? Have you 24 seen that previously? 25 A. I don't think I have -- no, because</p>
<p>1 INDEX 2 ----- 3 4 WITNESS: CYRIL H. WECHT, M.D., J.D. 5 6 EXAMINATION: PAGE 7 8 BY MR. OSTERMAN 4, 79 9 BY MS. SARO 75 10 11 EXHIBITS: 12 13 DR. WECHT DEPOSITION NOS. 1-5 4 14 DR. WECHT DEPOSITION NO. 6 33 15 DR. WECHT DEPOSITION NO. 7 34 16 17 18 19 20 21 22 23 24 25</p>	<p>1 I see my file marked with correspondence where 2 I would put such things. No, I do not, I have 3 not. 4 Q. We'll come back to this in a second. 5 We've marked as Exhibit 2 which is a copy of 6 what your staff, I guess, has provided to us on 7 the table. I have been provided with a CV 8 previously, but I just marked one on the table 9 on the assumption that that is the most recent 10 current and up-to-date CV. 11 A. Yes. It is the most recent that has 12 been typed. I'm working on a revision and 13 there are additions, articles, some 14 organizations, affiliations and so on, but that 15 is the only one I have. 16 Q. Are you in a position or when do you 17 anticipate to be in a position to provide that 18 updated CV rather than me going through and 19 asking you to detail all of the changes to it? 20 A. As a matter of fact, I'm trying to 21 get that finished up. I think by mid February 22 I want to have it, and I expect to have it by 23 mid February. 24 Q. Are there any publications that 25 you've authored that you think would be</p>

1 particularly relevant to the issues in this
2 case?

3 A. No.

4 Q. Any professional associations or
5 employment that you think is particularly
6 relevant to the issues in this case?

7 A. No.

8 MR. OSTERMAN: Can we have an
9 agreement, counsel, that you will provide me
10 with a copy of the updated CV?

11 MS. SARO: We will follow up
12 with Dr. Wecht and get that updated CV.

13 Q. We have marked as Exhibit 3 the list
14 of trial testimony and depositions. Is this
15 the most recent and up-to-date list that you
16 were able to compile?

17 A. Yes, but, obviously, there is some
18 things to be added. Again, nothing of any kind
19 that I can think of that relates to the issues
20 in this case. Most of the cases to be added
21 would be homicide trial in which I testified in
22 local counties. For example, there have been
23 four in the past two weeks in four different
24 counties. There was a wrongful death case in
25 Ohio, a malpractice case in West Virginia, a

1 criminal case in West Virginia. Those are the
2 only three that come to mind aside from the
3 county homicide cases in which I testified as a
4 forensic pathologist who had performed the
5 autopsies. So they will all be added, but
6 there is nothing in any of those cases that
7 touches upon the issues that I'm aware of in
8 this case.

9 Q. On the list here that's marked as
10 Exhibit 3, to the best of your recollection,
11 did any of those cases involve civil lawsuits
12 in which the manner of death was alleged to be
13 some form of asphyxiation?

14 A. Gee, I would really have to spend
15 some time -- I can tell you nothing at all like
16 the physical circumstances of this case with
17 this kind of piece of machinery or anything
18 else. Asphyxia is such a wide umbrella of
19 drowning, mudslides, other industrial kinds of
20 situations. It's very likely that there would
21 have been over the years that I started this
22 business. I forget when I started, 10, 12
23 years ago. It's very likely, but I can't
24 remember offhand any. I know there is nothing
25 that involves a washing machine or anything

1 like a washing machine.

2 Q. As you sit here today, can you
3 recall ever offering an opinion or testifying
4 regarding an opinion as to whether someone
5 experienced conscious pain and suffering during
6 the course of strangulation or asphyxiation?

7 A. I believe I have. I think it's come
8 up some times in homicide cases over the years,
9 questions about whether the person being
10 strangled could have done certain things and so
11 on. I think it has come up some times in that
12 context. I know it's come up in a variety of
13 cases dealing with asphyxiation. I'm trying to
14 think specifically with strangulation. Well, I
15 think there was a case in Massachusetts with an
16 elderly woman patient in a hospital bed and
17 somehow she got entangled in the privacy
18 curtain and strangled, and that was a
19 malpractice type case against, I guess, the
20 hospital, and I do believe that conscious pain
21 and suffering would have been addressed in that
22 case. That was four or five --

23 Q. Do you want to look at the list?

24 A. Here it is. Hildegard Palmer,
25 2000. Here it is. Yes. I remember the

1 attorney's name.

2 Q. It's on page 10 of Exhibit 3.
3 Abigail Williams was the name of the --

4 A. Plaintiff's attorney who had
5 consulted me.

6 Q. And in that case you had been
7 retained by the plaintiff's attorney?

8 A. Yes.

9 Q. Did that go to trial or deposition?

10 A. Yes, and I testified there in
11 Massachusetts.

12 Q. It says here Worcester,
13 Pennsylvania?

14 A. Oh, really? It shouldn't be.

15 MR. OSTERMAN: Let the record
16 reflect that you made a handwritten change to
17 the document.

18 A. Yes. It is Worcester, Mass.

19 Q. As you sit here today, are you able
20 to recall any other such cases in which you
21 testified?

22 A. Right now I can't. I want to say
23 that it is possible, and I will think about it.
24 There have been a couple of cases. I know I
25 have had a couple of cases that I have been

<p style="text-align: right;">14</p> <p>1 discussed within the report.</p> <p>2 Q. Is everything that you did and</p> <p>3 reviewed in connection with this case listed</p> <p>4 and described in the four corners of your</p> <p>5 January 17, 2006 report and the February 1st,</p> <p>6 supplement?</p> <p>7 A. Yes. I think I make reference to</p> <p>8 the statements, to the detectives, to the</p> <p>9 deposition of this boy's mother, the autopsy</p> <p>10 report and then an expert report of someone</p> <p>11 that have been consulted by the plaintiff. So</p> <p>12 I think that I make reference to those, and I</p> <p>13 have nothing else. Oh, and I think I also make</p> <p>14 reference to photos which I did receive.</p> <p>15 Q. Do you have the photos with you?</p> <p>16 A. Yes. I brought the copies of the</p> <p>17 photos that had been sent to me. Everything is</p> <p>18 here.</p> <p>19 Q. Can you pull out the photos?</p> <p>20 A. Yes.</p> <p>21 Q. Are these the actual photos that you</p> <p>22 were provided?</p> <p>23 A. That is what was sent to me.</p> <p>24 Q. And this is all you've reviewed in</p> <p>25 terms of photos?</p>	<p style="text-align: right;">16</p> <p>1 A. Only from what I read that there is</p> <p>2 a lid lock which I understand to mean that when</p> <p>3 the spindle is turning, the actual central</p> <p>4 working device, that one cannot open the lid.</p> <p>5 They call it a lid lock. Then some discussion</p> <p>6 about if it is open -- oh, no. When you try to</p> <p>7 open it, it takes 25 to 35 seconds or something</p> <p>8 like that for it to stop. That was I think</p> <p>9 in -- I'm just quoting what the gentleman had</p> <p>10 said in his report.</p> <p>11 Q. You are talking about the gentleman</p> <p>12 from the Consumer Product Safety Commission?</p> <p>13 A. Yes. Thank you. That's about it,</p> <p>14 and then there was an instruction that I quoted</p> <p>15 in my report, "Close lid. Washer does not</p> <p>16 advance into spin cycle unless lid is closed.</p> <p>17 For your safety, lid automatically locks during</p> <p>18 spin portions of each cycle. Lid automatically</p> <p>19 unlocks approximately one minute after cycle</p> <p>20 ends," and I quoted. I just picked that up. I</p> <p>21 think that was said to be an instruction on the</p> <p>22 undersurface of the washing machine's lid.</p> <p>23 Q. Is it your understanding that the</p> <p>24 washing machine worked as it was designed to</p> <p>25 work in terms of the lid lock mechanism?</p>
<p style="text-align: right;">15</p> <p>1 A. That's correct.</p> <p>2 Q. And these are black and white copies</p> <p>3 of -- black and white xerox copies of the</p> <p>4 photographs?</p> <p>5 A. Yes.</p> <p>6 Q. So I take it then you never saw the</p> <p>7 originals or at least colored copies of photos?</p> <p>8 A. I have not.</p> <p>9 Q. Have you ever actually spoken with</p> <p>10 the medical examiner in connection with this</p> <p>11 case?</p> <p>12 A. No.</p> <p>13 Q. Reviewed any other deposition</p> <p>14 transcripts, other than the deposition of</p> <p>15 Tameika Fitzgerald?</p> <p>16 A. No. That is the only one that was</p> <p>17 sent to me.</p> <p>18 Q. You told me you have no opinions</p> <p>19 regarding the design or manufacturer of the</p> <p>20 washing machine in particular; correct?</p> <p>21 A. That's correct.</p> <p>22 Q. Do you have any understanding as to</p> <p>23 how the washing machine worked and in</p> <p>24 particular how the lid lock mechanism worked in</p> <p>25 relation to the starting, stopping machine?</p>	<p style="text-align: right;">17</p> <p>1 MS. SARO: Just note my</p> <p>2 objection to the form.</p> <p>3 A. I was just going to say I would not</p> <p>4 even answer that. Not to be evasive, but I</p> <p>5 think that I really have no understanding of</p> <p>6 whether it worked the way it was suppose to or</p> <p>7 not. I think that gets into the area of the</p> <p>8 equipment and the evaluation and inspection of</p> <p>9 that equipment by different people. I really</p> <p>10 have no knowledge. I mean, I don't even have</p> <p>11 any personal knowledge from my own home.</p> <p>12 Q. Let me make sure I'm clear on this,</p> <p>13 and then I'll move on to a different subject.</p> <p>14 You have no opinion one way or the other as to</p> <p>15 whether the lid lock mechanism was, in fact,</p> <p>16 working as it was at least intended to work?</p> <p>17 MS. SARO: Just note my</p> <p>18 objection to form.</p> <p>19 Q. Is that a fair statement?</p> <p>20 A. Yes, that's correct.</p> <p>21 Q. Do you have any understanding as to</p> <p>22 the height of the washing machine?</p> <p>23 A. Just from the pictures a little bit,</p> <p>24 and kind of I guess in relationship to this</p> <p>25 boy's height of five feet five and a half</p>

<p>18</p> <p>1 inches. I guess I don't have a measurement 2 that I recall given to me. I think in my 3 mind's eye I envisioned it to be maybe 4 something about a foot higher than the surface 5 of this table from the floor. So I'm about 6 five whatever I am. I used to be 5'10", 5'9". 7 What am I doing here? About one, two, three. 8 I don't know maybe about three and a half, four 9 feet, probably closer to four feet, something 10 like that, but I don't have an exact 11 measurement. 12 Q. You don't have an exact measurement, 13 but you assume it to be or your impression is 14 that it's between three and a half to four feet 15 tall? 16 A. Something like that, yes. Yes, 17 somewhere around there. 18 Q. In forming your opinions did you 19 have any understanding as to how fast it would 20 spin in the spin cycle? 21 A. No. 22 Q. Do you have and did you make any 23 assumptions in coming to your opinions, did you 24 have any information as to how long it would 25 take for it to get to full speed in the spin</p>	<p>20</p> <p>1 MS. SARO: Object to the form 2 for several reasons. 3 A. I have no knowledge of that, and I 4 would express no opinion. I think that gets to 5 the whole question of how it works, how it 6 might not have worked properly, how it might 7 have been caused to work improperly. I do not 8 know. 9 Q. Is it fair to say then that you did 10 not take into account any aspect of the 11 mechanics of how the lid lock would work, how 12 fast it would be spinning, how long it would 13 spin for, how long it would take it to get to 14 full speed, how long it would take it to stop? 15 You didn't take into account any of those 16 factors in terms of forming any of the opinions 17 expressed in Exhibit 4. Is that a fair 18 statement? 19 MS. SARO: Just note my form 20 objection. 21 A. Yes. 22 Q. When you say the cause of death, 23 medicolegal question No. 1, you use the term 24 accidental ligature strangulation. What do you 25 mean by that term?</p>
<p>19</p> <p>1 cycle? 2 A. No. 3 Q. Do you know and did you make any 4 assumptions in coming to your opinions as to 5 whether the unit could start in the spin cycle 6 with the lid open? 7 A. Inferentially from the information 8 given, it was my understanding that it would 9 not. That relates to a question and an answer 10 I gave a couple of minutes ago in which I read 11 what the machine instructions say that the 12 washer does not advance into the spin cycle 13 unless lid is closed. I'm just parroting what 14 I read. 15 Q. Now, in terms of the mechanics of 16 how this accident happened, do you have an 17 opinion as to what -- let me back up. Do you 18 have an opinion as to how the machine got 19 started into the spin cycle? 20 A. No. 21 Q. Do you agree that in order to get 22 into the spin cycle, that he would have had to 23 have bypassed the lid lock device by somehow 24 sticking something in to depress the lid lock 25 lever?</p>	<p>21</p> <p>1 A. Number one, that the cause of death 2 is strangulation; two, ligature in the sense 3 that it's something that encircled the neck; 4 and, three, that it was accidental in its 5 occurrence. 6 Q. What specifically do you mean 7 accidental in its occurrence? Are you ruling 8 something out? 9 A. Yes, homicide, suicide and natural 10 death. 11 Q. How did you rule out homicide and 12 suicide? 13 A. I ruled out homicide by virtue of 14 the evaluations, studies and investigations 15 conducted by the police department and the 16 medical examiner's office and the deposition of 17 the mother. I also ruled out suicide because 18 of the absence of any such insertions, 19 allegations, beliefs, any history of that kind 20 of mental health illness and in part by what 21 would be an extremely bizarre form of suicide 22 if a 12-year-old boy were to reach the point of 23 deciding to commit suicide. For me as a 24 forensic pathologist dealing with cases in 25 which the manner and mechanism of death have to</p>

<p style="text-align: right;">22</p> <p>1 be ascertained and upon which opinions have to 2 be expressed as well as cause of death 3 opinions, then I deal with and move to those 4 questions. In my analysis of this case, based 5 upon everything that was done and checked into 6 and so on, that is my opinion, and I don't 7 hesitate to say that the fact that no criminal 8 charges, allegations of homicide have been 9 brought against the mother of this boy and the 10 fact that the medical examiner's office, which 11 is a good office, signed it out as accidental 12 contributed to and in buttress and are 13 completely consistent with the opinions that I 14 have arrived at independently. 15 Q. Again, you said your opinions rely 16 upon your understanding of the -- or your study 17 of the manner and mechanism of the accident? 18 A. Well, no. The opinion I expressed 19 contains my thoughts as to the manner and 20 mechanism. The decision or opinion of the 21 manner of death is indeed related to and 22 entwined with the mechanism. So once you 23 determine cause of death and then you evaluate, 24 analyze the mechanism by which the death 25 occurred, you are then led to a determination</p>	<p style="text-align: right;">24</p> <p>1 possible thing. 2 For example, what if this were a 3 65-year-old man. This was the father of the 4 woman in the house rather than her son and you 5 did an autopsy and you found some 6 atherosclerosis of the coronary arteries, you 7 have to think, gee, maybe cardiac arrhythmia, 8 lost consciousness or so on. What if he were a 9 diabetic with a history of labile glucose 10 levels and so on, did he have a hypoglycemic 11 episode or so on. 12 You've got a 12-year-old boy and he 13 is found by this machine. He is autopsied. 14 There are markings on the neck. Everything 15 else is ruled out. There are no other injuries 16 that would have been inflicted upon him by 17 somebody else that would have led to his death 18 or produced unconsciousness and which preceded 19 his then being placed in part into the machine. 20 I mean, I don't know what more to say. I don't 21 want to waste your time. If there were 22 anything else, I would tell you. I can't 23 phantom for the life of me what else could be 24 considered here. I don't like to be absolute 25 and dogmatic and I recognize, probably more</p>
<p style="text-align: right;">23</p> <p>1 of the manner of death. 2 Q. What study did you do of the 3 mechanism of death? 4 A. I reviewed all of those records and 5 materials that have been sent to me, and I have 6 thereby ruled out anything else as not only an 7 alternative, plausible explanation, but not 8 even any other explanation that I can conjure 9 up letting my mind run free. 10 Q. Without any understanding of how the 11 washer works, how can you say that you have an 12 understanding of the mechanism of the accident? 13 MS. SARO: Again, just note my 14 objection to the form of the question. 15 A. An analogous situation would be 16 doing an autopsy on someone who has been run 17 over by a car. The mechanism is the impact of 18 the automobile. Once you have ruled out other 19 things directly through police reports or 20 whatever that analogous situation might be, 21 then you are left with that. You can then deal 22 with the manner of death, but the cause of 23 death and the mechanism of death are clear. In 24 this case there is absolutely nothing. I mean, 25 I'm unaware, as I sit here today, of any</p>	<p style="text-align: right;">25</p> <p>1 maybe than most of my colleagues, possibilities 2 when there are possibilities. I am not aware 3 of any other possibility in this case. 4 Q. Your analogous of the car accident, 5 with all due respect, nobody is disputing that 6 he died by a strangulation as a result of 7 getting his sweater caught in the spindle. I'm 8 focused on your conclusion that it was 9 accidental, ruling out suicide or other means. 10 And going back to that, how can you say 11 accidental if you don't have even a rudimentary 12 understanding of how the washer worked and how 13 you could possibly get into that position 14 accidentally? 15 MS. SARO: Just not my 16 objection to the form. Go ahead, Doctor. 17 A. I have a rudimentary understanding 18 by virtue of my having read the report of the 19 person who studied the machine, also by having 20 read about the machine from the company itself 21 with the instructions how fast it works, how 22 long it takes to become operational, whether 23 the lid lock worked and so on. They don't 24 change for me anything at all. These are 25 things of a mechanical nature about which I</p>

<p style="text-align: right;">26</p> <p>1 express no opinions. It makes no difference to 2 me for purposes of the opinions that I 3 expressed what the answers to those questions 4 are. What ultimately may be determined about 5 the functional correctness of this piece of 6 equipment that is not for me to speculate upon. 7 Q. How long were Deshaw's arms? What 8 was his reach? 9 A. I don't know of course in my own 10 personal knowledge. As I recall, that 11 measurement was not made in the autopsy report. 12 I don't recall seeing that measurement. 13 Q. If you don't know his specific arm 14 length, do you have from your experience any 15 assumption or any basis upon which to 16 approximate the arm length of a 12 year old 17 five foot five inch tall average child? 18 A. A five foot five and a half inch 19 person would have arm lengths that would 20 generally fall within a range of an inch or 21 two, and such measurements are readily 22 available I'm sure in different kinds of 23 anthropological tables. I have not checked 24 those. That can be done. I'm not aware from 25 the description of this youngster by the</p>	<p style="text-align: right;">28</p> <p>1 the average height of American housewives who 2 do 95 percent probably of these kinds of chores 3 in our male chauvinistic society are not as 4 tall as five foot five and a half inches. I 5 just believe, I could be wrong, that the 6 machines are not made so as to require a stool 7 upon which these women must stand in order to 8 reach the back mechanism. So I think that 9 whatever the distance is and whatever the 10 length of his arm might be and whether he did 11 this or not, I don't know, but that if he 12 wanted to or that it is alleged or believed 13 that he did do it, that he would have been able 14 to reach it without standing on anything. 15 Q. Did you see in the police report 16 indication that the clothes in the washing 17 machine were dry when the police observed them? 18 A. Yes. In fact, I think I even make 19 reference to that in my report, as I recall. I 20 know that I have seen that and agree with that. 21 The answer is, yes, I'm aware of that. I was 22 just looking to see whether I actually even set 23 that forth in my own report. 24 Q. Does that have any significance to 25 you in terms of your understanding of the</p>
<p style="text-align: right;">27</p> <p>1 medical examiner that there was anything 2 anatomically abnormal. So, therefore, whatever 3 that range is, and it can be readily 4 ascertained either by going to the literature 5 or by getting four or five people who are about 6 5'5", 5'6" in height and making the 7 measurement. 8 Q. And I take it from your answer then, 9 A, you don't know, as you sit here today, what 10 that number would be, and implied in that is 11 that you've not undertaken as part of forming 12 your opinions in this case any anthropological 13 study of that question? 14 A. That is correct. 15 Q. Do you know and did you consider as 16 part of forming your opinion in this case 17 whether he could reach the control knob on the 18 back panel of the washing machine without 19 having to step on something or without having 20 to raise himself up in some manner? 21 A. The answer is no, qualified by the 22 belief that these machines have to be made in 23 such a way that a five foot five and a half 24 inch person would be able to reach that 25 mechanism. That is based upon my belief that</p>	<p style="text-align: right;">29</p> <p>1 manner and mechanism of the accident? 2 A. No. 3 Q. Do you dispute the fact that that 4 would mean that whoever turned the machine on 5 would have to have set it to the spin cycle 6 intentionally and then turned the machine on? 7 MS. SARO: Just note my 8 objection to the form. 9 Q. Do you dispute that? 10 A. I neither dispute nor acquiesce. I 11 have no opinion. 12 Q. And I take it that you have no 13 opinion one way or the other as to the 14 proposition that he would have to have also 15 been pressing down somehow the lid lock 16 mechanism simultaneously to starting the 17 machine? 18 MS. SARO: Again, form 19 objection. Go ahead, Doctor. 20 A. I have no opinion. 21 Q. Do you have any opinion as to the 22 position he was in when his sweater sleeve was 23 first caught by the spindle? 24 A. Yes. Here by inference in reading 25 about his mother finding him, the position of</p>

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1 the sweater and so on, I do believe that he
 2 would have been facing the machine pretty much
 3 straight on, and I do believe that the right
 4 arm had been inside the machine far enough and
 5 down enough for some part of the right sleeve
 6 of the sweater to have been caught by the
 7 turning mechanism. So that's all I can say. I
 8 don't know. In other words, I have no reason
 9 to believe he was sitting or standing or with
 10 his back to the machine. I think in order for
 11 things to have happened the way they have been
 12 described, he would have had to have been
 13 facing the machine more or less, and the right
 14 arm had to have been inside the cavernous
 15 component, the total space of the machine. It
 16 wasn't sucked in by -- I'm not aware of any
 17 suction, and I think the spindle part I know it
 18 doesn't shoot up or protrude or project upward.
 19 So, therefore, the arm had to have been down
 20 and inside to some extent.
 21 Q. You say the arm. Do you mean his
 22 arm, or do you mean his sleeve?
 23 A. The right arm. Well, the arm was in
 24 the sleeve. I do believe that the arm was in
 25 the sleeve.

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1 Q. That is your understanding of how
 2 the accident happened?
 3 A. Yes, and that the sleeve then got
 4 caught.
 5 Q. Did you see any indication anywhere
 6 in your review of the file that his right arm
 7 was out of the sleeve at the time that he was
 8 found?
 9 A. Yes. I think I do recall that that
 10 sleeve was wrapped up around -- yes, that his
 11 right arm was not in the sleeve when he was
 12 found. That is my understanding.
 13 Q. Is it your opinion, though, that his
 14 arm was in the sleeve at the moment the sleeve
 15 got first caught in the spindle and that he
 16 must have, therefore, pulled his arm out during
 17 the happening of the accident?
 18 MS. SARO: Just note my
 19 objection to the form. You may answer.
 20 A. That is indeed one possibility. I
 21 think it's not impossible or let me express it
 22 positively. I think it would be possible for
 23 the right arm not to have been in the sleeve,
 24 the right sleeve of the sweater, for the sleeve
 25 to have hung down and to have become entwined

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1 by the turning spindle. I think that that
 2 could have happened too. I do not know. I
 3 think that's possible.
 4 Q. I just want to make sure I
 5 understand your last answer. So you're saying
 6 it's possible that his right arm may have been
 7 in the sleeve, but it's also possible that it
 8 may have been out of the sleeve at the moment
 9 the sleeve was first caught in the spindle?
 10 A. Yes. I can close my eyes and see we
 11 have got a sleeve hanging down for whatever
 12 reason and in whatever fashion. The washing
 13 machine would not differentiate between the
 14 sleeve hanging down without an arm in it from a
 15 sleeve hanging down encircling the arm in the
 16 usual form of a tire.
 17 Q. Again, I just want to be clear. I'm
 18 just looking for a yes or no answer. Are you
 19 saying that both are possible, both of those
 20 situations are possible, or are you saying only
 21 one was possible in this instance?
 22 A. No. I think either is possible, and
 23 I do not express an opinion at this time. It's
 24 possible that if I -- I mean, if there were
 25 more tests done, and I had those, I just want

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1 to say that for the record, I might arrive at
 2 some opinion. Right now based on what I know,
 3 I think they are two possibilities. I cannot
 4 and do not express an opinion as to which of
 5 the two.
 6 Q. If it were not physically possible
 7 for his arm to have been in the sleeve at the
 8 moment the sleeve was caught in the spindle
 9 because of the mechanics of how the washer
 10 worked, would that impact your opinion at all
 11 with respect to whether you were able to offer
 12 an opinion that the manner and method of the
 13 death was accidental as opposed to suicide or
 14 homicide?
 15 MS. SARO: Just note my
 16 objection to the form. Go ahead.
 17 A. No. The scenario that you have
 18 outlined would not impact upon the
 19 determinations as to the mechanism and manner
 20 of death and obviously not on the cause of
 21 death.
 22 (Wecht Exhibit No. 6 was
 23 marked for identification.)
 24 Q. I'm showing you Exhibit 6. Have you
 25 seen at least a black and white copy of that

<p style="text-align: right;">34</p> <p>1 picture before?</p> <p>2 A. Yes. It sure does look familiar, as</p> <p>3 I recall.</p> <p>4 Q. And you recognize and acknowledge</p> <p>5 that to be a photograph of the washing machine</p> <p>6 in question with the lid up?</p> <p>7 A. Yes.</p> <p>8 Q. And do you understand that the black</p> <p>9 rectangular opening on the lower right-hand</p> <p>10 corner of the photograph that I'm pointing to,</p> <p>11 that's the opening for the lid lock mechanism?</p> <p>12 Do you understand that?</p> <p>13 MS. SARO: Just note my</p> <p>14 objection to the form, but you can answer.</p> <p>15 A. I hadn't thought about it. I accept</p> <p>16 that. I mean, it seems to be a slot and it</p> <p>17 would be subjacent to this device that one sees</p> <p>18 on the now elevated lid. That would seem to</p> <p>19 coincide. So, yes, I believe that.</p> <p>20 (Wecht Exhibit No. 7 was</p> <p>21 marked for identification.)</p> <p>22 Q. I'm going to show you another</p> <p>23 photograph. Photograph 7 is another</p> <p>24 photograph. This one shows the control panel</p> <p>25 to the washing machine with the lid down. Have</p>	<p style="text-align: right;">36</p> <p>1 himself?</p> <p>2 A. I have no opinion about that.</p> <p>3 Q. Would it have any impact in terms of</p> <p>4 your opinion that the manner and mechanism of</p> <p>5 death was accidental if you knew that in order</p> <p>6 to start the machine in the spin cycle, you</p> <p>7 would have to -- let me back up.</p> <p>8 Would it make any difference to your</p> <p>9 opinion regarding the manner and mechanism of</p> <p>10 death characterized by you as accidental to</p> <p>11 know that in order to start the machine with</p> <p>12 the lid up, one would have to simultaneously</p> <p>13 depress the lever and pull the control knob</p> <p>14 which is located behind the raised lid in</p> <p>15 Photo 6? Would that have any bearing on your</p> <p>16 opinion?</p> <p>17 A. No.</p> <p>18 MS. SARO: Just form</p> <p>19 objection. You may answer.</p> <p>20 Q. And I take it you did not take that</p> <p>21 into account in forming your opinion in this</p> <p>22 case. Is that a fair statement?</p> <p>23 A. That's correct. I did not take into</p> <p>24 account any of the possible ways in which this</p> <p>25 machine could have been moving with the lid up.</p>
<p style="text-align: right;">35</p> <p>1 you seen that before, and do you acknowledge</p> <p>2 that that is what it is?</p> <p>3 A. Yes. That's what it appears to be.</p> <p>4 Q. Do you agree that when the lid is</p> <p>5 up, it blocks the control knob?</p> <p>6 A. Well, it blocks it visually. I</p> <p>7 can't determine whether it blocks it in terms</p> <p>8 of somebody reaching around. I cannot tell and</p> <p>9 I do not know. I'm not saying that it does or</p> <p>10 doesn't. I'm just pointing out that when the</p> <p>11 lid is up, I don't know if there is any space</p> <p>12 between what would be the top of the lid and</p> <p>13 the back panel, but certainly I agree visually</p> <p>14 you cannot see it.</p> <p>15 Q. In forming your opinions, did you</p> <p>16 understand that since the clothes were dry,</p> <p>17 that Deshaw Young must have, if it was, in</p> <p>18 fact, an accidental death, Deshaw Young must</p> <p>19 have been the one who turned the machine on?</p> <p>20 MS. SARO: Just note my</p> <p>21 objection to the form.</p> <p>22 A. I have no opinion in response to</p> <p>23 that possible scenario.</p> <p>24 Q. Let me back up. Is it your opinion</p> <p>25 that Deshaw Young turned the machine on</p>	<p style="text-align: right;">37</p> <p>1 I am well aware, obviously, that this gets to</p> <p>2 the heart of the issues in this case, but I</p> <p>3 would not address these, and I want to say too</p> <p>4 I'm trying not to be evasive. Sort of in my</p> <p>5 own case as coroner I would get the homicide</p> <p>6 detectives and mechanical or electrical</p> <p>7 engineers from Pitt or Carnegie Mellon. I just</p> <p>8 want to let you know I would not make those</p> <p>9 determinations myself. I would want to know</p> <p>10 their opinions. I'm not saying I would be</p> <p>11 disdainful. I would solicit those thoughts and</p> <p>12 opinions, but I myself would not arrive at</p> <p>13 them, because I know nothing about mechanics.</p> <p>14 Q. Do you have any knowledge or</p> <p>15 understanding as to how far into the tub the</p> <p>16 sleeve would have to be in order for it to</p> <p>17 catch on the spinning spindle?</p> <p>18 A. No, other than obviously some</p> <p>19 portion, presumably the distal portion, but</p> <p>20 maybe even not necessarily that, but more</p> <p>21 likely far enough down to reach the turning</p> <p>22 cycle. Again, that would be a measurement that</p> <p>23 others would make. I do not know other than</p> <p>24 that sleeve either drooping down. Especially</p> <p>25 if it's not encircling an arm, it's not going</p>

<p style="text-align: right;">38</p> <p>1 to be folded in some widget fashion. 2 Therefore, it has to be kind of hanging down, 3 but, in any event, no, I do not know. That 4 would be a measurement from the opening down to 5 the superior most portion of the spindle, and I 6 guess that can be and probably has been 7 measured. 8 Q. Was there any evidence of injury to 9 his right hand or arm noted in autopsy or 10 observed by you in your review of the file or 11 photographs? 12 A. No. As I recall, no injuries were 13 noted on the hands or fingers. 14 Q. How much pressure needs to be 15 applied to the jugular vein in order to stop 16 blood flow? 17 A. Pressure, depending upon the degree 18 of subcutaneous fat, I don't recall offhand 19 exactly what has been measured in terms of 20 pounds of force, but not a great deal in a 21 slender person of 110. The jugular veins are 22 just beneath the skin several pounds. I could 23 check that easily enough but not a tremendous 24 amount of force. I forget. It's around 25 something like 11, 12 pounds of force. I would</p>	<p style="text-align: right;">40</p> <p>1 jugulars. 2 Q. Recognizing that you have not 3 undertaken any study of the specific mechanics 4 of this washing machine, would it be your 5 expectation -- an opinion, rather, that a 6 sweater caught by the sleeve in the full spin 7 cycle could tighten around the wearer's neck 8 and create enough force to compress the jugular 9 vein to the point that blood flow stopped? 10 A. Yes. 11 Q. And the same question with respect 12 to the carotid artery. In general, would you 13 think that the amount of pressure generated 14 from a sweater caught in a full spin cycle 15 could generate enough pressure to compress the 16 carotid arteries and stop blood flow? 17 A. I think it would be difficult for 18 enough force to be generated and imparted to 19 the neck to produce compression of the carotid 20 arteries. However, I am not prepared and do 21 not say that it would be impossible. I think 22 depending upon how much encirclement there 23 would be, and then what would be the 24 juxtaposition of the neck of the victim to the 25 spinning equipment, that would then determine</p>
<p style="text-align: right;">39</p> <p>1 have to check. 2 Q. But as you sit here today, you would 3 expect that number to be in the range of 10, 4 11, 12 pounds, something in that realm of 5 thinking? 6 A. I think something like that, yes. 7 MS. SARO: On a 110 pound boy? 8 THE WITNESS: Yes. It would 9 vary, yes. 10 Q. And the same question with respect 11 to the carotid artery. Would it be more? 12 Would it be less? 13 A. It would be more, because the 14 carotid arteries are deeper, and in order to 15 compress them, more pressure would have to be 16 applied. Again, I checked that number out, but 17 more and significantly more, not just another 18 pound or two more but several pounds more. 19 Q. And something on the order of 20 to 20 30 pounds would that be an approximation? 21 A. That's possible in that range. 22 Again, I could check that out. It would vary, 23 as I say, from one person to another, but 24 something on that order, not just a little bit 25 more than what is required to compress the</p>	<p style="text-align: right;">41</p> <p>1 whether that degree of force is sufficient to 2 compress the carotid arteries could be 3 produced. 4 I think physics would be such that 5 the longer the sleeves the greater the distance 6 the lesser the amount of force as if one were 7 pulled in closer and closer. Then you could 8 have more force applied. So that is the only 9 thing I can say. Then trying to picture where 10 the boy exactly was, my understanding is his 11 mother found him kind of leaning over and she 12 just pulled him out and sat him on the floor. 13 So I don't know exactly whether there was one 14 loop of the sweater or two loops or so on. 15 So getting back to your question, I 16 think the answer is unequivocally and 17 unhesitatingly yes for compression of the 18 jugulars, much less likely for compression of 19 the carotids for reasons that I have expressed. 20 MR. OSTERMAN: Will you read 21 his answer back. 22 (Last answer read back.) 23 Q. Sir, in your answer that we just had 24 read back you said that it's possible but in 25 your opinion not likely that a sweater sleeve</p>

<p>42</p> <p>1 caught in the full spin cycle of the washer 2 could generate enough force to be imparted to 3 the neck to compress the carotid artery, and 4 you said it would determine only, and one of 5 the things you listed was how much it encircled 6 the neck. I just want to focus on that one 7 factor, and you listed other factors. 8 A. How much it encircled the spinning, 9 the spindle. 10 Q. So that part of your answer that's 11 what you meant, in other words, how far around 12 it was wrapped around the spindle? 13 A. Well, yes, because then that would 14 tell you how close the boy's neck would have 15 been to the turning mechanism. 16 Q. And the closer his neck was pulled 17 to the mechanism the more force that would be 18 imparted to the neck and specifically the 19 carotid arteries? 20 A. Yes, I believe so. 21 Q. And you then later said you don't 22 know whether the sweater was one loop or two 23 loops or more than that wrapped around the 24 spindle. Is that a fair statement? 25 A. That's correct.</p>	<p>44</p> <p>1 about on the lid. I don't recall. If you have 2 it there, please point it out. I'm looking 3 quickly through the attachments to the medical 4 examiner's report, and I don't see it. 5 Q. The abrasions that you observed -- 6 I'm sorry -- the abrasions that you referenced 7 where were the abrasions on his body? 8 A. The abrasions were -- I'm reading 9 now from page 3 of the autopsy report. There 10 were superficial abrasions on the anterior 11 aspect of the neck toward the left and there 12 was described a horizontal contused abrasion, 13 measuring three and a half inches in length on 14 the left side of the neck. Then on the right 15 side of the neck seven inches below the top of 16 the head there were two separate abrasions, 17 measuring about a half an inch in greatest 18 dimension. Then back to the left side of the 19 neck he describes another superficial abrasion 20 extending around toward the back, measuring two 21 and a quarter inches in length, and then on the 22 right side of the neck he describes an 23 indistinct abrasion, measuring three quarters 24 of an inch, and there was a red colored 25 contusion medial and below the left nipple, one</p>
<p>43</p> <p>1 Q. And then you also referenced the 2 juxtaposition of the neck to the equipment. 3 What did you mean by that? 4 A. That's just another way of putting 5 it. 6 Q. Same thing? 7 A. Exactly the same thing. 8 Q. Did you see any evidence that he was 9 pulled forcefully into and his face contacted 10 the washing machine within the course of the 11 accident? 12 MS. SARO: Just note my 13 objection to the form. 14 A. I'm not aware of that the mother 15 ever indicated that, and of course nobody else 16 saw the boy when he was found at the machine. 17 Q. Did you see any evidence in the 18 police reports of blood being found on the lid? 19 A. Well, he had some abrasions. 20 Q. I'm specifically referring to blood 21 on the lid? 22 A. No. I'm saying blood comes from the 23 body, and I know you asked me about on the lid. 24 I'm saying if he had some abrasions, so that 25 can account for some blood, but you are asking</p>	<p>45</p> <p>1 half by one quarter of an inch. So those were 2 the abrasions that were described by the 3 pathologist. 4 Q. The abrasions of the neck, one of 5 them you mentioned was a horizontal contusion 6 or a contused abrasion, I think you said? 7 A. He described it as a contused 8 abrasion that was on the left side, left 9 lateral aspect. 10 Q. Point to that on you. 11 A. The sternocleidomastoid muscle which 12 he references is the muscle that goes up from 13 the sternum onto the clavicle onto the mastoid. 14 So it goes up in kind of a diagonal fashion. 15 So if you turn your neck, you can feel that 16 muscle there (indicating), and he's telling us 17 that on the left side of the neck overlying 18 that muscle there was this horizontally 19 oriented abrasion which had a contused 20 appearance, and it measured three and a half 21 inches in length. So it's on the left side of 22 the neck. 23 Q. Were all of the abrasions and 24 contusions noted there on the neck area in your 25 opinion caused by the ligature of the sweater</p>

<p style="text-align: right;">46</p> <p>1 around the neck?</p> <p>2 A. Yes.</p> <p>3 Q. What about the contusion on the</p> <p>4 chest below the left nipple?</p> <p>5 A. I think that small area of contusion</p> <p>6 was not caused by the sweater, and it probably</p> <p>7 was caused then it was pulled down and that</p> <p>8 part of the chest would just impact against the</p> <p>9 top of the machine and produce a small bruise.</p> <p>10 Q. Do you have any opinion as to</p> <p>11 whether he was literally pulled in to the</p> <p>12 machine by the spinning of the spindle?</p> <p>13 A. I think to some extent he would have</p> <p>14 been pulled in. I have no opinion with regard</p> <p>15 to a specific measurement. My answer is</p> <p>16 intended to say that I do not envision him</p> <p>17 remaining in an upright standing position once</p> <p>18 the sweater sleeve becomes caught and the</p> <p>19 spindle is moving. There, I think, has to be</p> <p>20 some pulling of him downward by virtue of the</p> <p>21 sleeve moving around and the sweater still on</p> <p>22 his body.</p> <p>23 Q. For the sweater to have tightened</p> <p>24 tight enough to ultimately kill him around his</p> <p>25 neck, would it in your opinion have had to have</p>	<p style="text-align: right;">48</p> <p>1 that it was lifting him up either on his tippy</p> <p>2 toes or completely off his feet, wouldn't that</p> <p>3 increase the likelihood of compression of the</p> <p>4 carotid artery to the point of blocking blood</p> <p>5 flow.</p> <p>6 A. Well, actually, I think the</p> <p>7 opposite. If he were lifted up and pulled</p> <p>8 down, at least initially maybe, he might be</p> <p>9 just fortuitously bending with the flow, so to</p> <p>10 speak, going in with the movement and so on.</p> <p>11 However, consistent with the answer I gave</p> <p>12 before, if the encirclement continued and he</p> <p>13 were pulled up, it's not that his being pulled</p> <p>14 up, per se, could lead to greater pressure on</p> <p>15 the carotids, but the fact that he has been</p> <p>16 pulled up would indicate that the sweater is</p> <p>17 becoming more encircled and greater force is</p> <p>18 being imparted, as I indicated before. But</p> <p>19 right from the beginning if somebody is being</p> <p>20 pulled up or into something, and if you can</p> <p>21 kind of go with it, you would at least</p> <p>22 initially decrease the pressure, whereas if you</p> <p>23 just continue to stand and somebody is pulling</p> <p>24 you or something is pulling you and just stand</p> <p>25 there for whatever reason, then there would be</p>
<p style="text-align: right;">47</p> <p>1 lifted him up at least off his toes in front of</p> <p>2 the machine? In other words, was his full</p> <p>3 weight being held up by the sweater?</p> <p>4 A. No. I do not believe that it would</p> <p>5 have been necessary for his body to have been</p> <p>6 lifted either off the ground or even onto his</p> <p>7 tippy toes. That kind of gets back to a</p> <p>8 question you asked me some time ago about the</p> <p>9 height of the machine. We have this five foot</p> <p>10 five and a half inch boy, and depending upon</p> <p>11 what the distance is between his neck and the</p> <p>12 top of the machine, would determine in great</p> <p>13 measure how much of a forward downward movement</p> <p>14 would have occurred from the head, face and</p> <p>15 upper torso. I don't think he would have had</p> <p>16 to have been lifted from the ground</p> <p>17 necessarily.</p> <p>18 Q. Well, whether he had to be</p> <p>19 necessarily, do you have an opinion one way or</p> <p>20 the other as to whether he was?</p> <p>21 A. The answer is, no, I do not have an</p> <p>22 opinion.</p> <p>23 Q. Wouldn't that impact the likelihood</p> <p>24 of the carotid artery being compressed? In</p> <p>25 other words, if it pulled him up to the point</p>	<p style="text-align: right;">49</p> <p>1 greater force if you say, hey, okay, stop</p> <p>2 machine or stop person and so on, you could</p> <p>3 diminish it, but if you continue -- if what it</p> <p>4 is that is pulling you down continues to get</p> <p>5 stronger and stronger and pulls you more and</p> <p>6 more, then I think you have a greater force</p> <p>7 being imparted. Also, then by definition or</p> <p>8 inherent in such a hypothetical scenario you</p> <p>9 have a temporal component, that if there is</p> <p>10 more encirclement and more pulling in, then you</p> <p>11 are adding some seconds. I don't mean a long</p> <p>12 period of time. I have no way of measuring</p> <p>13 that, but that becomes another element too in</p> <p>14 the formula.</p> <p>15 Q. You've listed a number of variables,</p> <p>16 and I had asked you on just about every single</p> <p>17 one of them whether you had any knowledge or</p> <p>18 understanding or opinion as to things like the</p> <p>19 speed at which it's spinning, the length of his</p> <p>20 sleeve, his position relative to the spindle</p> <p>21 and whether it's lifted him up and off the</p> <p>22 floor and so forth, and on each and every one</p> <p>23 you told me you didn't have an opinion. Given</p> <p>24 all of the unknown variabilities, how are you</p> <p>25 able to offer an opinion to a reasonable degree</p>

<p>50</p> <p>1 of medical certainty that in this case the 2 tightening of the sweater around his neck did 3 not compress the carotid arteries sufficient to 4 block blood flow?</p> <p>5 MS. SARO: Just note my 6 objection to the form. You may answer.</p> <p>7 A. Well, for one thing, as I expressed 8 in my report, as the right sleeve becomes 9 encircled and pulls, it's the left side of the 10 neck which is being compressed by the sweater. 11 The right side is being pulled away from the 12 neck. You can't have both sides being 13 compressed simultaneously. So you have that 14 unevenness to begin with by virtue of how this 15 would have evolved no matter how it got 16 started.</p> <p>17 The second thing is, you've got a 18 tremendous amount of petechial hemorrhages 19 florid, to use the word of prosector, and it's 20 a perfectly applicable, adjectival description 21 because they are florid and you see them in the 22 subscapular area too in the photo. These are 23 all manifestations of venous congestion. These 24 fit in with the engorgement produced by the 25 compression on the jugular veins and you would</p>	<p>52</p> <p>1 from petechia but very severe congestion.</p> <p>2 Q. The first batch of photographs I'll 3 just identify by the Bates number that was 4 provided. All of them have the prefix DEF and 5 then Nos. 223 through 230, inclusive 234, and 6 235 and 249. And these show petechial 7 hemorrhaging?</p> <p>8 A. Yes.</p> <p>9 Q. You would acknowledge these are not 10 great quality autopsy photographs?</p> <p>11 A. Well, the version that I have. I'm 12 not criticizing the photos but the black and 13 white faxes. Of course, I would obviously 14 prefer to see the originals, but you ask me on 15 what I relied. So I seen those and then I 16 correlate with the autopsy report. They would 17 be showing much more clarity and dramatically 18 in the color photos.</p> <p>19 Q. But you have not seen those.</p> <p>20 A. No.</p> <p>21 Q. The photos showing the congestion 22 are marked Bates No. DEF247, 248, 250, 251, 236 23 through 243 inclusive. Where are the 24 references that you are relying in the autopsy 25 report with respect to the extent of the</p>
<p>51</p> <p>1 not get, in my opinion, this amount and the 2 profuse distribution of these petechial 3 hemorrhages if you did not have this continuing 4 jugular compression. So I think, and as I have 5 said, the amount of force that would be 6 required to produce bilateral carotid artery 7 compression would be substantial and would then 8 be required bilaterally. So I do not believe 9 that the death was that quick and the 10 pathophysiological process is that rapid that 11 he would have been able to develop this profuse 12 distribution of florid petechia.</p> <p>13 Q. When you refer to the tremendous 14 amount of florid petechia, is that your 15 characterization based on your review of the 16 black and white copies of the photos, or are 17 you relying on the description provided in the 18 autopsy report?</p> <p>19 A. Both.</p> <p>20 Q. Show me the photos you are relying 21 on.</p> <p>22 A. These collectively and individually 23 depict petechia, this group that I've just 24 handed you, and this second group depicts 25 severe congestion in neck structures, different</p>	<p>53</p> <p>1 petechia hemorrhaging?</p> <p>2 A. Well, beginning on the first page of 3 the report, not counting what I'll call the 4 cover sheet, the part that begins with the word 5 up on top certification and then just below 6 external examination. So you see there in the 7 third paragraph, the second sentence, the face 8 showed evidence of suffusion and extensive 9 petechial hemorrhages extending from the 10 forehead, eyelids, face and upper neck region.</p> <p>11 Q. Which paragraph?</p> <p>12 A. Under external examination I was 13 reading the third paragraph. Now, then the 14 fourth paragraph, the next one, the third 15 sentence reads the conjunctiva both the 16 palpebral and the bulbar showed florid 17 petechial hemorrhages and confluent petechial 18 hemorrhage on the medical aspect of the bulbar 19 conjunctiva bilaterally.</p> <p>20 Q. What does that mean, that sentence?</p> <p>21 A. The covering of the eyes called the 22 conjunctiva, and the part under the eyelids is 23 the palpebral, and the part over the eyeball is 24 the bulbar. So he's describing these on both 25 the palpebral when you lift up the eyelid and</p>

<p style="text-align: right;">54</p> <p>1 peel it back, and you'll see in one of those 2 pictures that they are peeling it back with a 3 stick or something. It's like the 4 ophthalmologist does some times, if you've ever 5 been there, and he really wants to get a good 6 look at your eye and then over the eye itself. 7 Then going to the next page I don't 8 see any reference there, and going to the third 9 page it says evidence of injury in caps. In 10 the first sentence, "As mentioned there was 11 florid petechial hemorrhages involving the face 12 and upper neck region. These started above the 13 interrupted ligature mark around the neck. 14 This extended from the left towards the right 15 side." 16 Continuing down the last three, four 17 sentences, the last three sentences, I think, 18 under evidence of injury reads, "However, there 19 was marked suffusion of the base of the tongue 20 and congestion and enlargement at the lingual 21 tonsils. The retropharyngeal region also was 22 congestion (sic). The tracheo-larynx showed 23 congestion and focal petechia." 24 Then going to the next page 4, the 25 very top, "Head (Central Nervous System)."</p>	<p style="text-align: right;">56</p> <p>1 A. Pardon me? 2 Q. What causes congestion? 3 A. A backup, an engorgement of blood. 4 Congestion means blood inside blood vessels, 5 hemorrhage is blood outside blood vessels. So 6 congestion in a case like this would be due to 7 the fact that the blood is not being 8 circulated. It's not getting back to the 9 heart. It is backing up, and when it backs up, 10 it gives you congestion. 11 Q. Were you done? 12 A. Yes. I think that I have -- well, 13 here going down under evidence of injury then 14 on that page there is one more. The last 15 paragraph before internal examination. 16 Q. Which page? 17 A. He calls it page 3. You have a big 18 paragraph called evidence of injury. The last 19 short paragraph -- the second paragraph which 20 is short reads in the third sentence, "Focal 21 petechial hemorrhages that were superficial 22 were noted in the left pectoral region above 23 the left nipple." 24 Q. Can petechial hemorrhage occur in a 25 situation involving the compression of both the</p>
<p style="text-align: right;">55</p> <p>1 Second sentence, "There is marked petechial 2 hemorrhages of the galeal tissue, especially 3 involving the left temporalis muscle region." 4 Q. What does that mean? 5 A. Galeal is underneath the scalp. We 6 call that subscapular or subgaleal. It's a 7 tight membrane, and so he's describing all of 8 these hemorrhages, and he says especially in 9 the left area just in from the ear would be the 10 left temporal region in from and a little bit 11 above and behind and below is the temporal 12 area. 13 Q. So that would be under the skin? 14 A. Underneath the scalp, yes. That is 15 right. The scalp has been reflected, and he's 16 now telling you what it looks like there. 17 Now, going down to on that page 18 respiratory system, the second sentence, "The 19 pleural surfaces were smooth glistening and 20 mild focal petechia were noted." 21 And then on the top of page 5 under 22 Alimentary Tract the third sentence in that 23 paragraph, "The base of the tongue showed 24 marked congestion as mentioned." 25 Q. What causes congestion?</p>	<p style="text-align: right;">57</p> <p>1 carotid and jugular? 2 A. Yes. 3 Q. In your opinion if there were 4 compression on both the carotid and jugular, 5 would the petechial hemorrhaging look different 6 than if only the jugular was compressed? 7 A. Yes, because I think if the carotid 8 arteries were compressed, then you would not be 9 getting blood going up through the arterial 10 system, and, hence, the degree and extent of 11 the congestion which is what produces the 12 petechial hemorrhages would not have occurred. 13 In other words, for this profusion of petechial 14 hemorrhages such as we see here to occur you 15 have got to have substantial congestion caused 16 by a backing up of blood in compressed jugular 17 veins. The blood coming down from the head and 18 face eventually into the jugular veins can't 19 make its way down, and so you get all of these 20 petechial hemorrhages. If you had blood not 21 going up because carotid arteries were 22 compressed, then you wouldn't have that much 23 blood being backed up. So I think what we are 24 seeing is a manifestation of more backing up in 25 which the blood has been able to get on up into</p>

<p style="text-align: right;">58</p> <p>1 the head through the arterial system but cannot 2 then make its way back down through the venous 3 system into the superior vena cava and the 4 heart. 5 Q. If you have compression of only the 6 carotid artery and not compression of both 7 jugulars, could you still see petechial 8 hemorrhaging? 9 A. I don't think that you could have 10 that in terms of a strangulation. There would 11 be no way that I could think of in which you 12 could have force imparted into the neck to 13 produce compression of the carotids without 14 compressing the overlying more externally 15 located jugulars. You couldn't do that. 16 Q. If you had compression of only one 17 of the carotid arteries, how long would it take 18 before loss of consciousness, assuming a 19 blockage of the jugulars? 20 A. I think it would take about a minute 21 or so, because the other carotid would suffice. 22 Some people have total blockage of the carotid 23 artery due to atherosclerosis or other reasons. 24 So as long as you have one carotid, you might 25 eventually wind up with some brain damage from</p>	<p style="text-align: right;">60</p> <p>1 III and IV. 2 Q. In this case you've opined that it 3 would have taken approximately one minute for 4 him to lose consciousness; is that correct? 5 A. Yes. I think that after about a 6 minute or so, I think he would have been 7 unconscious. 8 Q. At what point would he have begun to 9 lose consciousness, in your opinion? 10 A. I think probably after about in this 11 kind of situation in about 15 seconds I think 12 he's going to begin to have a decreased level 13 of full consciousness, just roughly, and then 14 probably over about 45, 50 seconds he's going 15 to decrease slowly, and then move into 16 unconsciousness after about a minute, roughly. 17 Q. Was there any evidence that he 18 struggled against the ligature as it tightened 19 around his neck and you saw from the autopsy? 20 A. I find no evidence one way or the 21 other. I mean, there is nothing I can point to 22 to indicate that he did and nothing that I find 23 that would preclude that from having occurred. 24 This was a smooth surfaced piece of equipment 25 externally. The sweater itself is not jagged.</p>
<p style="text-align: right;">59</p> <p>1 one part of the brain not getting its full 2 supply, but in terms of consciousness, I think 3 you would still have about a minute because of 4 the other carotid artery supplying arterial 5 oxygenated blood to the brain. 6 Q. In your opinion in this case would 7 the loss of consciousness to the decedent have 8 progressed gradually, or would it have just 9 been -- in other words, would he have been 10 fully conscious until that moment? 11 A. No. It doesn't work that way. 12 Unless you get your head smashed in or your 13 heart blown out with a shotgun blast, you don't 14 have unconsciousness occurring in a literal 15 split second. Unconsciousness is an 16 ingravescent course. Full consciousness to 17 some beginning loss of consciousness leading 18 into less and less consciousness and then 19 unconsciousness, semicoma, coma, stupor and 20 death. So the answer is, no, it does not 21 happen in a split second. You have 22 consciousness and that begins to leave you and 23 then you move into a state of unconsciousness, 24 and even unconsciousness has its own levels 25 too, pretty much like anesthesia, Grades I, II,</p>	<p style="text-align: right;">61</p> <p>1 It's soft fabric. So there is no evidence one 2 way or the other. 3 Q. In autopsies such as this have you 4 ever looked for evidence such as scratch marks 5 on the neck or bruises on the fingertips 6 suggesting that the victim tried to pull back 7 against the ligature? 8 A. Some times you can find that. In 9 homicidal strangulations where someone is 10 conscious to begin with and aware of what is 11 happening we'll some times see such fingernail 12 marks where the victim is struggling against 13 the assailant. 14 Q. I think I have asked you this. I'm 15 not sure. So I'll ask it one more time. I 16 take it you have no opinion as to how long the 17 machine would have been spinning after it 18 initially caught his sweater sleeve; is that 19 true? 20 A. That's correct. 21 Q. Do you have an opinion as to whether 22 he was conscious or unconscious when it stopped 23 spinning? 24 A. No; I have no opinion. 25 Q. Going back to your opinion regarding</p>

<p style="text-align: right;">62</p> <p>1 the petechial, the significance of the 2 petechial hemorrhaging observed in this case, I 3 think I asked you and you told me that 4 petechial hemorrhaging could occur in the case 5 of simultaneous compression of the carotid 6 artery and jugular veins? 7 A. Yes. Some petechial hemorrhage 8 could occur. 9 Q. But you said there would be a 10 difference in the extent of the petechial 11 hemorrhage? 12 A. I believe so. In the florid, it's 13 as good a word, I can't think of -- I'm tired 14 of using the same word, but the florid nature, 15 the intensity and the wide pattern of 16 distribution in my opinion are viewed strongly 17 for venous congestion, because that is what is 18 believed to be the principal, if indeed not the 19 sole cause of petechial hemorrhages in cases of 20 asphyxiation. 21 Q. Can you point to any scientific 22 literature which you are aware that says that 23 you would not get florid petechial hemorrhages 24 in a case involving compression of both carotid 25 arteries?</p>	<p style="text-align: right;">64</p> <p>1 have a specific reference that you would cite 2 in support of your proposition? 3 A. No. I'm speaking as a forensic 4 pathologist who has been doing this work for 45 5 years in forensic pathology, and those are my 6 opinions. 7 Q. Are those opinions based on any 8 specific testing that was done in relation to 9 this case? 10 A. No. I'm not aware of any testing 11 that was done in this case. Oh, if you're 12 asking did I do any, no, no testing I can do 13 that I'm aware of. 14 Q. Describe the extent of petechial 15 hemorrhaging that you would expect to see in a 16 situation in which both the carotid and 17 jugulars are involved? 18 A. That would vary greatly, but I would 19 expect to see some petechial hemorrhages in 20 different places, certainly on the conjunctiva 21 and maybe elsewhere on the face and so on but 22 just not to the degree and extent and not with 23 the size and intensity. So, in other words, it 24 would be more a matter of the intensity of the 25 visual demonstrable nature of them rather than</p>
<p style="text-align: right;">63</p> <p>1 MS. SARO: Just note my 2 objection to the form. You can answer. 3 A. I have no specific reference. You 4 can check different textbooks on forensic 5 pathology. They would be the best books for 6 such discussions and see if you find a 7 discussion that is based upon or which relates 8 to circumstances at least somewhat similar to 9 those encountered in this case. Insofar as 10 what books are concerned, I can't give you 11 specific books, but I believe that forensic 12 pathology textbooks would be the best source. 13 I don't know that other books of medical 14 specialty would address these things. 15 Q. And again, same question with 16 respect to the extent of the petechial 17 hemorrhaging as a basis upon which to opine 18 that the carotid arteries were not involved? 19 A. My answer would be the same. You're 20 asking me where you might read about this kind 21 of scenario and learn about jugular vein 22 compression, carotid artery compression and so 23 on. I would refer to forensic pathology 24 textbooks. 25 Q. But I'm asking specifically do you</p>	<p style="text-align: right;">65</p> <p>1 anatomic distribution. The anatomic 2 distribution would be essentially the same or 3 potentially the same. Head, face, neck, 4 subscapular areas and so on, that is not going 5 to vary. 6 Q. You are relying for your opinion 7 regarding the extent of it in this case is 8 based on your review of the black and white 9 xerox copies and then whatever was described by 10 the doctor who performed the autopsy? 11 A. Well, that is correct. If the 12 colored photos prove to depict a different 13 picture, I will readily correct and, if 14 necessary, revise. I'm quite comfortable in 15 conjecturing that the colored photographs will 16 in a much more dramatic and clear fashion 17 demonstrate what was present and correlate with 18 what was described. 19 Q. Is it your usual practice to rely on 20 black and white xerox copies of photos, or is 21 it your usual practice to obtain the actual 22 colored photos? 23 A. I would prefer the colored photos. 24 Q. Can you recall any instance in which 25 you testified based on a review of black and</p>

<p style="text-align: right;">66</p> <p>1 white xerox copies?</p> <p>2 A. Oh, I'm sure that has happened. I</p> <p>3 can't tell you a specific case, but there have</p> <p>4 been cases where I did not get colored photos</p> <p>5 for one reason or another. That's not a</p> <p>6 rarity.</p> <p>7 Q. I mean photos of autopsies.</p> <p>8 A. Yes, photos of autopsies, right, and</p> <p>9 that happens, sure.</p> <p>10 Q. Has it ever happened in a criminal</p> <p>11 case in which you've testified on behalf of the</p> <p>12 prosecution?</p> <p>13 A. I think it probably has, yes.</p> <p>14 Q. Can you think of any particular</p> <p>15 instance?</p> <p>16 A. No; I can't tell you a specific</p> <p>17 case. And if I then have gone on to testify, I</p> <p>18 would then have seen the colored photos. If</p> <p>19 there are things that I cannot determine and</p> <p>20 express opinions about because they're black</p> <p>21 and white copies, then I will state that. If</p> <p>22 there are things which permit me to express</p> <p>23 opinions even with that, then I will do so,</p> <p>24 because I will be comfortable in the knowledge</p> <p>25 that the actual colored photos are going to be</p>	<p style="text-align: right;">68</p> <p>1 really not essential.</p> <p>2 And by the way, I would like to,</p> <p>3 looking at the last two pages here, petechial</p> <p>4 hemorrhages, refer you to page 6 of the report.</p> <p>5 Q. Of whose report?</p> <p>6 A. Of the autopsy report, page 6 in</p> <p>7 which the pathologist sets forth the pathologic</p> <p>8 diagnosis and you'll note under No. 3</p> <p>9 summarizes, quote No. 3, "Florid petechial</p> <p>10 hemorrhages involving in forehead, face,</p> <p>11 eyelids, oral mucosa and labial mucosa." That</p> <p>12 is inside the lips and mouth. So this is just</p> <p>13 another point of reference on the petechial</p> <p>14 hemorrhages.</p> <p>15 Q. Again, is it still your opinion that</p> <p>16 it's not the location of the hemorrhages, but</p> <p>17 it's the extent of the hemorrhages upon which</p> <p>18 you base your opinion?</p> <p>19 A. That's correct.</p> <p>20 Q. There is a reference in the autopsy</p> <p>21 report at page 3 under the paragraph evidence</p> <p>22 of injury, third to the last sentence of that</p> <p>23 paragraph that begins, "However, there was</p> <p>24 marked suffusion of the base of the tongue and</p> <p>25 congestion and enlargement at the lingual</p>
<p style="text-align: right;">67</p> <p>1 much more clear and definitive.</p> <p>2 Q. You were then sent some slides that</p> <p>3 you took a look at; correct?</p> <p>4 A. Yes; there was some microscopic</p> <p>5 slides, and I looked at those. Those are the</p> <p>6 ones that are referred to in the autopsy</p> <p>7 report. I have copies of those five slides. I</p> <p>8 mean, I shouldn't say copies of, duplicates of.</p> <p>9 Q. What were those slides of?</p> <p>10 A. Liver, heart, brain, lung and</p> <p>11 kidney.</p> <p>12 Q. What were you looking for in those?</p> <p>13 A. It's just proper for a pathologist</p> <p>14 looking at an autopsy report to look at micros,</p> <p>15 and they showed really nothing, except what has</p> <p>16 been set forth, and I would agree with the</p> <p>17 pathologist, congestion that could be seen in</p> <p>18 the section of the lung and in the section of</p> <p>19 the kidneys and some very early changes in some</p> <p>20 of the cells in the brain. The liver and the</p> <p>21 heart showed nothing. I agree. So I'm not</p> <p>22 looking for anything specific but one never</p> <p>23 knows. I always ask for slides. Some times I</p> <p>24 get them and some times I don't. Some times</p> <p>25 they are essential. In this case they are</p>	<p style="text-align: right;">69</p> <p>1 tonsils." What does that mean?</p> <p>2 A. Suffusion is synonymous with</p> <p>3 congestion. So at the base of the tongue he</p> <p>4 found engorgement of the vessels and also the</p> <p>5 tonsillar structures which are just off to the</p> <p>6 sides. So they were congested and he felt that</p> <p>7 they were enlarged, the whole area, and then he</p> <p>8 goes on, the retropharyngeal which means behind</p> <p>9 the pharynx congestion, tracheo-larynx</p> <p>10 congestion of the petechia. So it all just all</p> <p>11 fits in.</p> <p>12 Q. The next page, top paragraph under</p> <p>13 beginning with the sentence the scalp was</p> <p>14 reflected and then the next sentence says,</p> <p>15 "There is marked petechial hemorrhages of the</p> <p>16 galeal tissue."</p> <p>17 A. We pronounce it galeal.</p> <p>18 Q. Galeal tissue. What part --</p> <p>19 A. That is the undersurface of the</p> <p>20 scalp.</p> <p>21 Q. The next sentence the dura mater and</p> <p>22 flax cerebri?</p> <p>23 A. It should be falx, F-A-L-X, falx</p> <p>24 cerebri. That is a membrane that comes down</p> <p>25 between the two cerebral hemispheres.</p>

<p style="text-align: right;">70</p> <p>1 Q. It's supposed to be what word?</p> <p>2 A. Falx, F-A-L-X. In other words, the</p> <p>3 L and the A are turned around there, falx.</p> <p>4 Q. Then the sentence the leptomeninges?</p> <p>5 A. That is the arachnoid and pia. You</p> <p>6 have the three membranes. The dura is the</p> <p>7 thick membrane. The arachnoid is a delicate</p> <p>8 spiderweb like called the arachnoid, and the</p> <p>9 pia is actually the outer most layer of the</p> <p>10 brain cells, and those two are referred to as</p> <p>11 the leptomeninges. They were congested also.</p> <p>12 Q. What is the significance of the</p> <p>13 congestion there?</p> <p>14 A. Just part of the asphyxial picture.</p> <p>15 Q. The next sentence, "The cerebral</p> <p>16 hemispheres were symmetrical but edematous with</p> <p>17 flattening of the gyri and broadening of the</p> <p>18 sulci." What does that mean?</p> <p>19 A. The gyri are the convolution. You</p> <p>20 seen pictures of the brain, those curvy things.</p> <p>21 Each one of those is a gyrus and plural gyri,</p> <p>22 and sulcus, plural sulci, is the space between</p> <p>23 any two gyri. So they were edematous he noted</p> <p>24 which would be part of the swelling of the</p> <p>25 brain. When the brain is insulted by not</p>	<p style="text-align: right;">72</p> <p>1 capillaries as part of the congested process.</p> <p>2 Q. Does the congestion process continue</p> <p>3 after the loss of consciousness?</p> <p>4 A. Yes, because you're still alive and</p> <p>5 the heart is not doing its job, and so the</p> <p>6 blood continues to back up and can give you</p> <p>7 more congestion.</p> <p>8 Q. At what point does the congestion</p> <p>9 process begin?</p> <p>10 A. Did you say begin?</p> <p>11 Q. Begin.</p> <p>12 A. It begins when whatever is causing</p> <p>13 the asphyxiation begins. So from the moment</p> <p>14 that there is compression of in this case the</p> <p>15 neck, the jugular vein, that's the beginning of</p> <p>16 congestion.</p> <p>17 Q. So the congestion begins immediately</p> <p>18 and the process continues until --</p> <p>19 A. Well, first you have to have some</p> <p>20 pressure, not in a split second, but a few</p> <p>21 seconds.</p> <p>22 Q. Begins within seconds of</p> <p>23 compression?</p> <p>24 A. If the compression is significant.</p> <p>25 You know, I can compress my neck here and that</p>
<p style="text-align: right;">71</p> <p>1 getting enough oxygen, it swells, and that's</p> <p>2 why he says the hemispheres were symmetrical</p> <p>3 but edematous. The edema is manifested by the</p> <p>4 flattening of the gyri. When it's not under</p> <p>5 pressure, then there is room and they have a</p> <p>6 little convexity there. When they press up</p> <p>7 against the inside of the dura, then they get a</p> <p>8 little flattened, and as they get flattened and</p> <p>9 widened, the space between the sulci changes.</p> <p>10 So that is what he's describing there.</p> <p>11 Q. Under microscopic report there is a</p> <p>12 reference to the slides relating to the lung?</p> <p>13 A. Yes. We referred to that before as</p> <p>14 one of the slides that I got.</p> <p>15 Q. The findings what is that?</p> <p>16 A. Septal congestion, the wall between</p> <p>17 two air sacs which can only be seen</p> <p>18 microscopically. There are probably millions</p> <p>19 of these. That's, by the way, where the blood</p> <p>20 gas exchange occurs giving up CO2 and taking on</p> <p>21 oxygen in the aveolar capillaries. So this is</p> <p>22 part of the congestion. In the intra-alveolar</p> <p>23 presence of red blood cells that means within</p> <p>24 the air sacs, intra-alveolar presence. So red</p> <p>25 blood cells have already spilled out from these</p>	<p style="text-align: right;">73</p> <p>1 is compression. So when you talk about</p> <p>2 significant compression, sufficient to compress</p> <p>3 the jugulars. I should make that clear, not</p> <p>4 just somebody coming up and saying, hi, a</p> <p>5 doctor feeling your pulse or even pressing down</p> <p>6 more to see if you have enlarged lymph nodes or</p> <p>7 so on. That's compression, but that doesn't</p> <p>8 mean a thing, and it's not going to produce</p> <p>9 congestion.</p> <p>10 Q. I understand that, but significant</p> <p>11 compression defined as you just defined it</p> <p>12 means significant enough to compress --</p> <p>13 A. In this case the jugulars.</p> <p>14 Q. -- the jugulars?</p> <p>15 A. Right. You are talking about the</p> <p>16 neck, and then within a few seconds congestion</p> <p>17 will commence.</p> <p>18 Q. And the process will continue until</p> <p>19 the heart stops beating?</p> <p>20 A. Yes, but as you're dying, it's going</p> <p>21 to become de minimus because in the dying</p> <p>22 process the metabolism is decreasing and</p> <p>23 everything is just ebbing and not much is</p> <p>24 happening.</p> <p>25 Q. How are you being compensated in</p>

<p style="text-align: right;">74</p> <p>1 this case?</p> <p>2 A. I received \$5,000 for the case</p> <p>3 review which is my standard fee. That covers</p> <p>4 the review and analysis of the documents and my</p> <p>5 written report and included the examination of</p> <p>6 the microscopic slides. So all of that was</p> <p>7 included, and then today I get paid for the</p> <p>8 deposition, and I do charge the attorneys, this</p> <p>9 is our law firm, \$1,000. We talked on the</p> <p>10 phone yesterday, and I reviewed everything</p> <p>11 again. So again, it is a standard what I call</p> <p>12 pre-deposition conference and then the charge</p> <p>13 that was made, I believe, to you, and that's</p> <p>14 standard \$1,500 for the first two hours and</p> <p>15 \$500 for each hour thereafter. Those are the</p> <p>16 charges that have been made in this case.</p> <p>17 Q. Have you been paid anything else in</p> <p>18 connection with this case?</p> <p>19 A. No, I haven't.</p> <p>20 Q. If you were to testify in connection</p> <p>21 with this case if it were to go to trial, what</p> <p>22 would your charge be?</p> <p>23 A. Standard fee I charge \$5,000</p> <p>24 per diem, plus reimbursement of necessary</p> <p>25 travel expenses.</p>	<p style="text-align: right;">76</p> <p>1 MR. OSTERMAN: While you're</p> <p>2 doing that, I want to run to the men's room</p> <p>3 real quick.</p> <p>4 (Short recess taken.)</p> <p>5 MS. SARO: Back on the record.</p> <p>6 Q. You've looked at these colored</p> <p>7 photographs?</p> <p>8 A. Yes, I have.</p> <p>9 Q. Any changes in your testimony with</p> <p>10 respect to the extent of the petechial</p> <p>11 hemorrhaging that you see --</p> <p>12 MR. OSTERMAN: Object to the</p> <p>13 form.</p> <p>14 Q. -- now that you've had an</p> <p>15 opportunity to review the clear colored</p> <p>16 photographs?</p> <p>17 A. No.</p> <p>18 Q. With respect to you were asked about</p> <p>19 some, I guess, text material or source material</p> <p>20 for the petechial hemorrhaging and the extent</p> <p>21 that you saw them with respect to Deshaw Young</p> <p>22 in this matter, and you said not one specific</p> <p>23 text but generally just forensic textbooks?</p> <p>24 A. Well, there are many textbooks in</p> <p>25 forensic pathology.</p>
<p style="text-align: right;">75</p> <p>1 Q. I'm going to show you, I marked it</p> <p>2 as an exhibit, we haven't used it, a diagram</p> <p>3 that's been marked as Exhibit 5. Is that</p> <p>4 generally --</p> <p>5 A. That's good. Jugular veins you see</p> <p>6 more outside, carotid. It's simplistic but</p> <p>7 it's quite good, and the trachea, the windpipe,</p> <p>8 the thyroid cartilage, our Adam's apple. Yes,</p> <p>9 that is fine.</p> <p>10 MR. OSTERMAN: Those are all</p> <p>11 the questions that I have.</p> <p>12 MS. SARO: If you don't mind,</p> <p>13 Doctor, I don't want to be too long. I'll be</p> <p>14 really quick.</p> <p>15 -----</p> <p>16 EXAMINATION</p> <p>17 BY MS. SARO:</p> <p>18 Q. I did bring the colored photos. So</p> <p>19 I thought if you wanted to look at them, you</p> <p>20 could. I would offer that to you at this</p> <p>21 point. If you want to just match them up with</p> <p>22 the pictures that you showed Mr. Osterman. I</p> <p>23 don't think that it should take too long.</p> <p>24 A. If you're asking me to do that, then</p> <p>25 I'll do it.</p>	<p style="text-align: right;">77</p> <p>1 Q. That is what I wanted to follow up</p> <p>2 on that a little bit.</p> <p>3 A. There is DiMaio, D-i-M-A-I-O, and</p> <p>4 DiMaio. I think it's father and son. There is</p> <p>5 Bernard Knight, K-N-I-G-H-T. There is --</p> <p>6 Q. Let me ask you this, Dr. Wecht, just</p> <p>7 to try to sort of fast track it, so to speak.</p> <p>8 There is no one specific authority --</p> <p>9 A. Spitz and Fischer, S-P-I-T-Z.</p> <p>10 Q. Is it a fair statement to say that</p> <p>11 there is no one specific authority with respect</p> <p>12 to the extent of the petechial hemorrhaging</p> <p>13 that you would expect to see where the jugular</p> <p>14 veins are compressed. However, within the</p> <p>15 realm of forensic pathology one would expect</p> <p>16 that in the event that a situation occurred</p> <p>17 such as in Deshaw Young's case it is the</p> <p>18 jugular vein that is being compressed, you</p> <p>19 would expect to see florid petechial</p> <p>20 hemorrhaging?</p> <p>21 MR. OSTERMAN: Object to the</p> <p>22 form.</p> <p>23 Q. Do you understand what I'm asking</p> <p>24 you?</p> <p>25 A. Yes. That is correct. I can't</p>

<p style="text-align: right;">78</p> <p>1 refer you to a specific. As you can imagine, 2 it's not possible to conduct an experiment on 3 living people. We can only work in 4 retrospective fashion which is what forensic 5 pathologists have done, and some times you know 6 some of the details of the scenario from third 7 parties, the assailants themselves, maybe 8 police or in accidental situations onlookers 9 and so on, and then you correlate those things 10 with what you find, and that's how knowledge 11 has accumulated with regard to injuries that 12 cannot be duplicated experimentally. 13 Q. And that is within the realm of 14 forensic pathology? 15 A. Yes. 16 Q. That is something that you are well 17 versed and capable in rendering an opinion on? 18 A. Yes. 19 Q. I wanted to ask you one other 20 question with respect to the pathologist's 21 report, and I believe you also quoted it in 22 your report of January 17th. It's the notation 23 with regards to the superficial red colored 24 contusion just medial and below the left 25 nipple. Do you recall that?</p>	<p style="text-align: right;">80</p> <p>1 spindle and he was pulled such that his chest 2 contacted the front edge of the washing 3 machine, could that cause a bruise. 4 A. You said if he were pulled in? 5 Q. Yes. In other words, let's assume 6 that that thing is spinning extremely fast. 7 Let's assume it pulled him with a very, very 8 hard force slamming his chest into the front 9 edge of the washing machine. Could that cause 10 a bruise? 11 A. Yes. 12 Q. And would it look exactly as 13 described there? 14 A. Yes. 15 Q. So the presence of the bruise 16 doesn't tell you whether he struggled beyond 17 that, does it? 18 A. No, it does not. 19 Q. With respect to the authorities that 20 you referenced, the DiMaio text, the 21 Bernard Knight and the Spitz and Fischer text, 22 those are just generally recognized forensic 23 pathology or at least pathology textbooks; 24 correct? 25 A. Yes.</p>
<p style="text-align: right;">79</p> <p>1 A. Yes; I remember that. 2 Q. I'm reading at page 3, that finding 3 that contusion, would that be consistent with, 4 say, a person struggling against the washing 5 machine as they're being pulled in and trying 6 to get themselves free from the washing 7 machine? 8 A. Yes. I believe that the level on 9 the chest wall would fit in with a contact with 10 the machine, and it certainly could be from 11 someone being pulled down and someone 12 struggling, so on. It would be consistent. I 13 think most likely that is when and how it 14 occurred. I can't tell you what was in 15 anybody's mind at the moment, but I think that 16 that is almost certainly the explanation for 17 that focal confusion. 18 MS. SARO: Thank you, Doctor. 19 I don't have anything else. 20 ----- 21 EXAMINATION 22 BY MR. OSTERMAN: 23 Q. To follow on that focal contusion, 24 if he was pulled in by the force of the sweater 25 being grabbed by the or caught on to the</p>	<p style="text-align: right;">81</p> <p>1 Q. You are not saying that there is 2 anything specific in those texts that say or 3 that support your opinion regarding petechial 4 hemorrhaging or the extent of petechial 5 hemorrhaging as indicating whether the carotid 6 artery was involved with the jugular or just 7 the jugular? 8 A. No, I am not. I really don't know, 9 and I would tell you if I had read those and 10 could point to something. And if I read them 11 and they disagreed, I sure wouldn't have given 12 you the names. So, no, I don't know what is 13 there. I'm just giving you some names of some 14 textbooks on forensic pathology. 15 Q. Are you aware of any textbooks or 16 articles that disagreed with the opinions that 17 you've expressed today? 18 A. I have not looked it up. 19 Q. So you don't know one way or the 20 other? 21 A. Insofar as what the textbooks say, 22 no, not specifically. 23 Q. Or scientific literature of any 24 kind? 25 A. No. That is right. I'm not giving</p>

<p>82</p> <p>1 you any particular reference, because I don't 2 have a specific reference. 3 Q. How about any articles that you've 4 written, have you ever written on this 5 particular subject? 6 A. I have written on asphyxiation but 7 not on this, no. You mean on this jugular and 8 with and without carotid compression and the 9 correlation of one and the other with the 10 amount of petechial hemorrhage? The answer is, 11 no, I have not. 12 Q. The articles that you've written can 13 you identify by the number of them, you've got 14 them listed there, can you identify those that 15 dealt specifically with asphyxiation. 16 A. I'm going to guess at some of these 17 based upon titles. Possibly No. 38, I would 18 put that with a question mark, 47, 92, possibly 19 208, possibly 242, 255, possibly 267, possibly 20 299, possibly 461, possibly 469. Those are 21 ones that I think. 22 MR. OSTERMAN: Thank you very 23 much. Those are the questions I have. 24 25</p>	<p>84</p> <p>1 COMMONWEALTH OF PENNSYLVANIA) E R R A T A COUNTY OF ALLEGHENY) S H E E T 2 3 FRANK YOUNG, et al vs. 4 FRIGIDAIRE COMPANY, et al 5 I, CYRIL H. WECHT, M.D., J.D., have read 6 the foregoing pages of my deposition given on Wednesday, January 31, 2007, and wish to make 7 the following, if any, amendments, additions, deletions or corrections: 8 Pg. No. Line No. Change and reason for 9 change: 10 11 12 13 14 15 16 17 18 19 In all other respects the transcript is true 20 and correct. 21 CYRIL H. WECHT, M.D., J.D. 22 Subscribed and sworn to before me this 23 _____ day of _____, 2007. 24 _____ Notary Public (MRC) 25</p>
<p>83</p> <p>1 (Signature not waived.) 2 (Whereupon, the above-entitled 3 matter was concluded at 1:50 p.m.) 4 ----- 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25</p>	<p>85</p> <p>1 COMMONWEALTH OF PENNSYLVANIA) COUNTY OF ALLEGHENY) 2 3 I, Monica R. Chandler, a notary public in and for the Commonwealth of Pennsylvania, do 4 hereby certify that the witness, CYRIL H. WECHT, M.D., J.D., was by me first duly sworn 5 to testify the truth, the whole truth, and nothing but the truth; that the foregoing 6 deposition was taken at the time and place stated herein; and that the said deposition was 7 recorded stenographically by me and then reduced to typewriting under my direction, and 8 constitutes a true record of the testimony given by said witness, all to the best of my 9 skill and ability. 10 I further certify that the inspection, reading and signing of said deposition were not 11 waived by counsel for the respective parties and by the witness and if after 30 days the 12 transcript has not been signed by said witness that the witness received notification and has 13 failed to respond and the deposition may then be used as though signed. 14 I further certify that I am not a 15 relative, or employee of either counsel, and that I am in no way interested, directly or 16 indirectly, in this action. 17 IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal of office this 18 12th day of February 2007. 19 20 21 S/Monica R. Chandler ----- 22 ----- 23 Monica R. Chandler 24 25</p>

22 (Pages 82 to 85)

1 COMMONWEALTH OF PENNSYLVANIA) E R R A T A
 2 COUNTY OF ALLEGHENY) S H E E T

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11 Pg. No. Line No. Change and reason for
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13
 14
 15
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 17
 18
 19
 20 In all other respects the transcript is true
 21 and correct.

22 _____
 23 CYRIL H. WECHT, M.D., J.D.

24 Subscribed and sworn to before me this
 25 _____ day of _____, 2007.

 Notary Public

(MRC)